

FEB 03 2003

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PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0851-0032

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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

- ☐ Declaration Submitted with Initial Filing OR ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number

First Named Inventor

Catia BASTIOLI

**COMPLETE IF KNOWN**

Application Number

/

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

"Articles to be chewed by animals"

the specification of which

(Title of the invention)

- ☐ is attached hereto  
OR

☒ was filed on (MM/DD/YYYY) 03/14/2000

as United States Application Number or PCT International

Application Number PCT/EP00/02227 and was amended on (MM/DD/YYYY) 03/08/2001 (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
T099A000199	ITALY	03/15/1999	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

(Page 1 of 2)

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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**RIDER ANNEXED HERETO AND MADE A PART HEREOF**

We hereby appoint the following attorneys to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Maurice B. Stiefel, Reg. No. 18,479; Lawrence G. Kurland, Reg. No. 24,895;  
Stephen P. Gilbert, Reg. No. 27,893; Mark E. Waddell, Reg. No. 31,803; David  
A. Roodman, Reg. No. 35,663; N. Whitney Wilson, Reg. No. 38,661; Daniel A.  
Crowe, Reg. No. 39,644; Stephen M. Haracz, Reg. No. 33,397; Warren K.  
MacRae, Reg. No. 37,876; Kevin C. Hooper, Reg. No. 40,402; Kathleen Gersh,  
Reg. No. 41,806; Charles T. Weigell, Reg. No. 43,398; Stephen Brown, Reg. No.  
43,519; Angel Herrera, Jr., Reg. No. 46,767; Christopher J. Hayes, Reg. No.  
41,822; Donald J. Lenkszus, Reg. No. 28,096; John D. Titus, Reg. No. 39,047;  
and Susan Stone Rosenfield, Reg. No. 36,287

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I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (If applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

OR

☐ Registered practitioner(s) name/registration number listed below

Place Customer  
Number Bar Code  
Label here

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number  or Bar Code Label

OR ☐ Correspondence address below

Name					
Address	BRYAN CAVE LLP				
Address	245 Park Avenue				
City	New York	State	NY	ZIP	10167
Country	US	Telephone	(212) 692-1838	Fax	(212) 692-1900

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

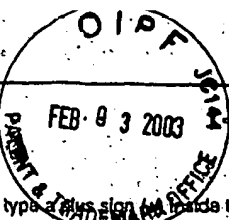
Given Name (first and middle if any)		Family Name or Surname	
Catia		BASTIOLI	
Inventor's Signature		Date	Sept. 19 2001
Residence: City	NOVARA	State	Italy
Post Office Address	Via della Noce 63		
Post Office Address			
City	NOVARA	State	Italy
ZIP	I-28100	Country	Italy

☒ Additional Inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page \_\_\_\_ of \_\_\_\_

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) <u>Roberto</u>				Family Name or Surname <u>LOMBI</u>			
Inventor's Signature <u>[Signature]</u>	Date Sept. 19 2001						
Residence: City <u>NOVARA</u>	State <u>IT</u>	Country <u>Italy</u>	Citizenship <u>Italian</u>				
Post Office Address <u>Via Fara 51</u>							
Post Office Address							
City <u>NOVARA</u>	State <u>IT</u>	ZIP <u>I-28100</u>	Country <u>Italy</u>				
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) <u>Matteo</u>				Family Name or Surname <u>NICOLINI</u>			
Inventor's Signature <u>Matteo Nicolini</u>	Date Sept. 19 2001						
Residence: City <u>CRESSA (Novara)</u>	State <u>IT</u>	Country <u>Italy</u>	Citizenship <u>Italian</u>				
Post Office Address <u>Via Borgomanero 82</u>							
Post Office Address							
City <u>CRESSA (Novara)</u>	State <u>IT</u>	ZIP <u>I-28012</u>	Country <u>Italy</u>				
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature	Date						
Residence: City	State	Country	Citizenship				
Post Office Address							
Post Office Address							
City	State	ZIP	Country				

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